HSCRC Consumer Engagement Taskforce Meeting

May 28, 2015

primary care coalition
of Montgomery County, Maryland

8757 Georgia Ave, 10th Floor
Silver Spring, MD 20910

www.primarycarecoalition.org

About the Primary Care Coalition (PCC)

Vision:
A community in which all residents have the opportunity to live healthy lives
Montgomery County: A model for providing access to high quality, efficient care for all.

Mission:
Develop and coordinate a community-based health care system that strives for universal access and equity for low-income, uninsured, and ethnically diverse community members.

About the Primary Care Coalition (PCC)

Core competencies:

- Collaboration
- Integration
- Process improvement

What We Do:

- Foster and coordinate a high quality, efficient community-based health care system
- Strive for universal access and health equity for low-income uninsured and underinsured community members
- Create models for providing access to high quality and efficient care for all
- Administer public-private partnerships that provide health care for low-income, uninsured, ethnically diverse individuals

H.E.A.L.T.H. Partners

2011

- Partnered with Montgomery County DHHS Aging and Disabilities, Holy Cross Hospital, and Housing Opportunities Commission to improve care transitions for dual eligible patients

2013

- Coalition formed with Delmarva
- 16 organizations and residents of Holly Hall
- Access to hospital Medicare admission and readmission data
- Small tests of change

2014

- Over 20 organizations representing multiple disciplines
- Change from Delmarva to VHQC
- Spread other senior housing units

H.E.A.L.T.H. Partners

Mission:
To improve the transition of care from hospital to community for residents of the region, thereby reducing preventable readmissions to acute care hospitals.

Purpose:

- To build and sustain a community coalition with a focus on improving transitions of care.
- To be a vehicle for the patient and family voice.
- To encourage person-centered and person-directed models of care.
- To collaborate and encourage efforts of organizations with shared visions.
- To advance public policies that furthers the vision.
- To share Best Practices in caring for community residents.

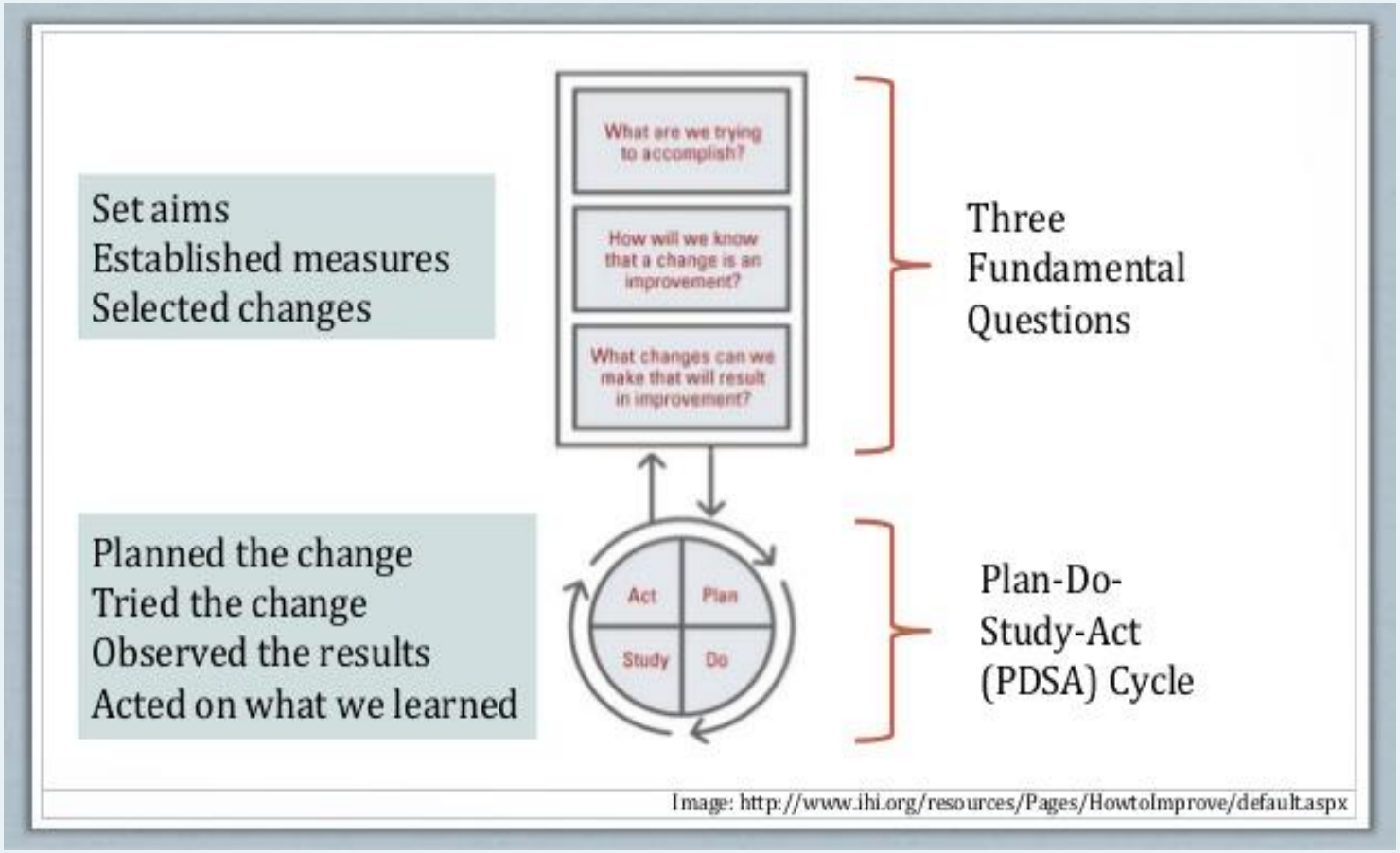
First Site-Holly Hall

96 units/112 Residents

On site resident counselor

Race ○**African American 49%** ○**Asia 18%** ○**White 32%** ○**Middle Eastern 1%**	**Age** ○**< 60 years 17%** ○**> 60 years 83%**
Ethnicity ○Hispanic 22% ○Non-Hispanic 78%	**Disabilities:** ○Medically Frail 42% ○Physical Disability 29% ○Psychological/Neurological 16% ○Cognitive 10%

Interventions/Tests of Change

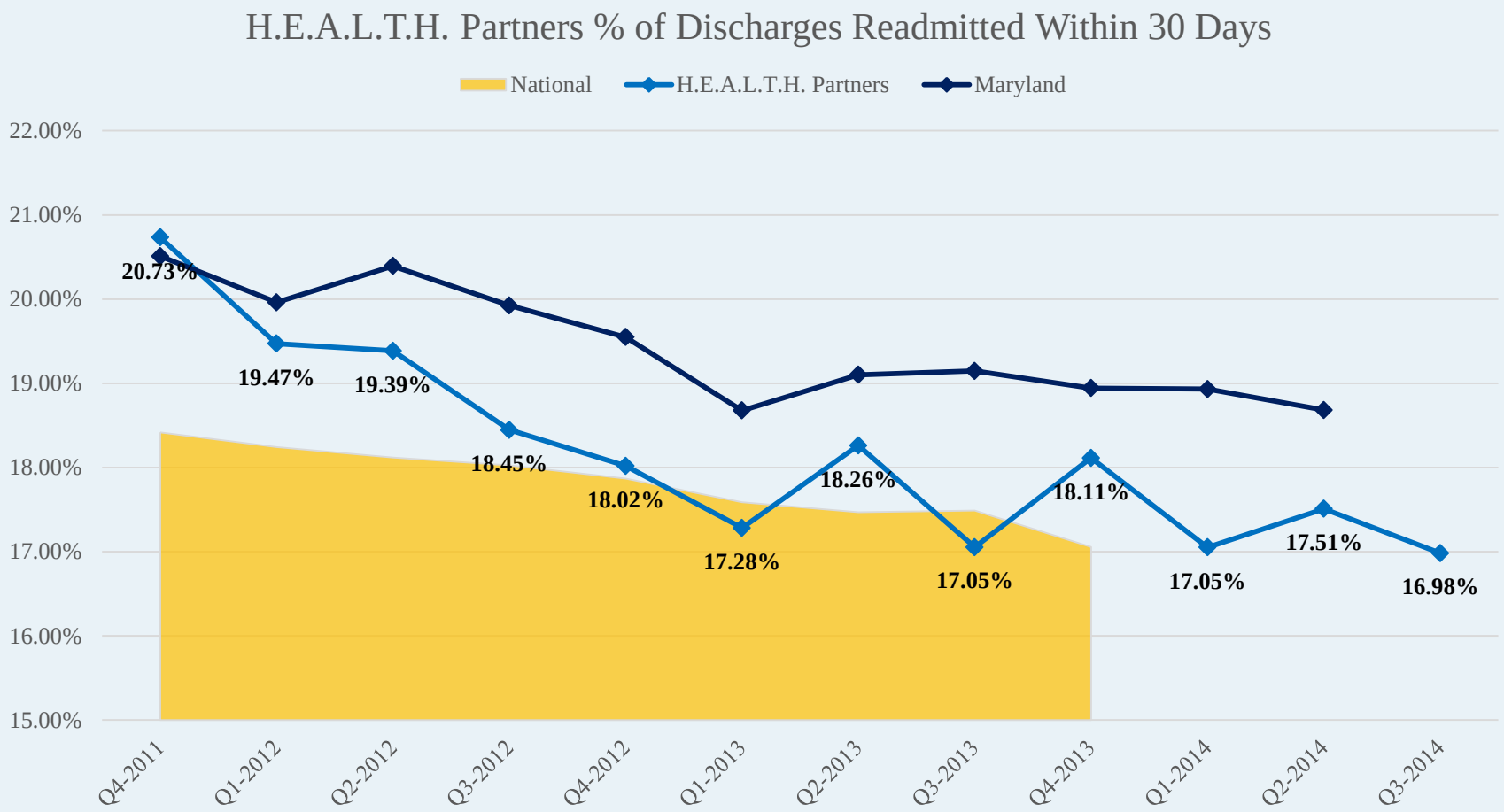


Data

- The H.E.A.L.T.H partners community (Montgomery County has approximately 127,434 Medicare beneficiaries.)

- VHQC provides part A & B claims data and ongoing analysis for communities to assist with the identification of improvement opportunities.
  - Readmissions
  - Admissions
  - ED visits
  - # of days from discharge to readmission
  - Top Diagnoses
  - Specific Focus Areas

Data


H.E.A.L.T.H. Partners % of Discharges Readmitted Within 30 Days
National
H.E.A.L.T.H. Partners
Maryland
22.00%
21.00%
20.00%
19.00%
18.00%
17.00%
16.00%
15.00%
20.73%
19.47%
19.39%
18.45%
18.02%
17.28%
18.26%
17.05%
18.11%
17.05%
17.51%
16.98%
Q4-2011
Q1-2012
Q2-2012
Q3-2012
Q4-2012
Q1-2013
Q2-2013
Q3-2013
Q4-2013
Q1-2014
Q2-2014
Q3-2014

Resident Engagement

- Resident Meeting
- Resident Brochure
- Resident Interviews

File of Life

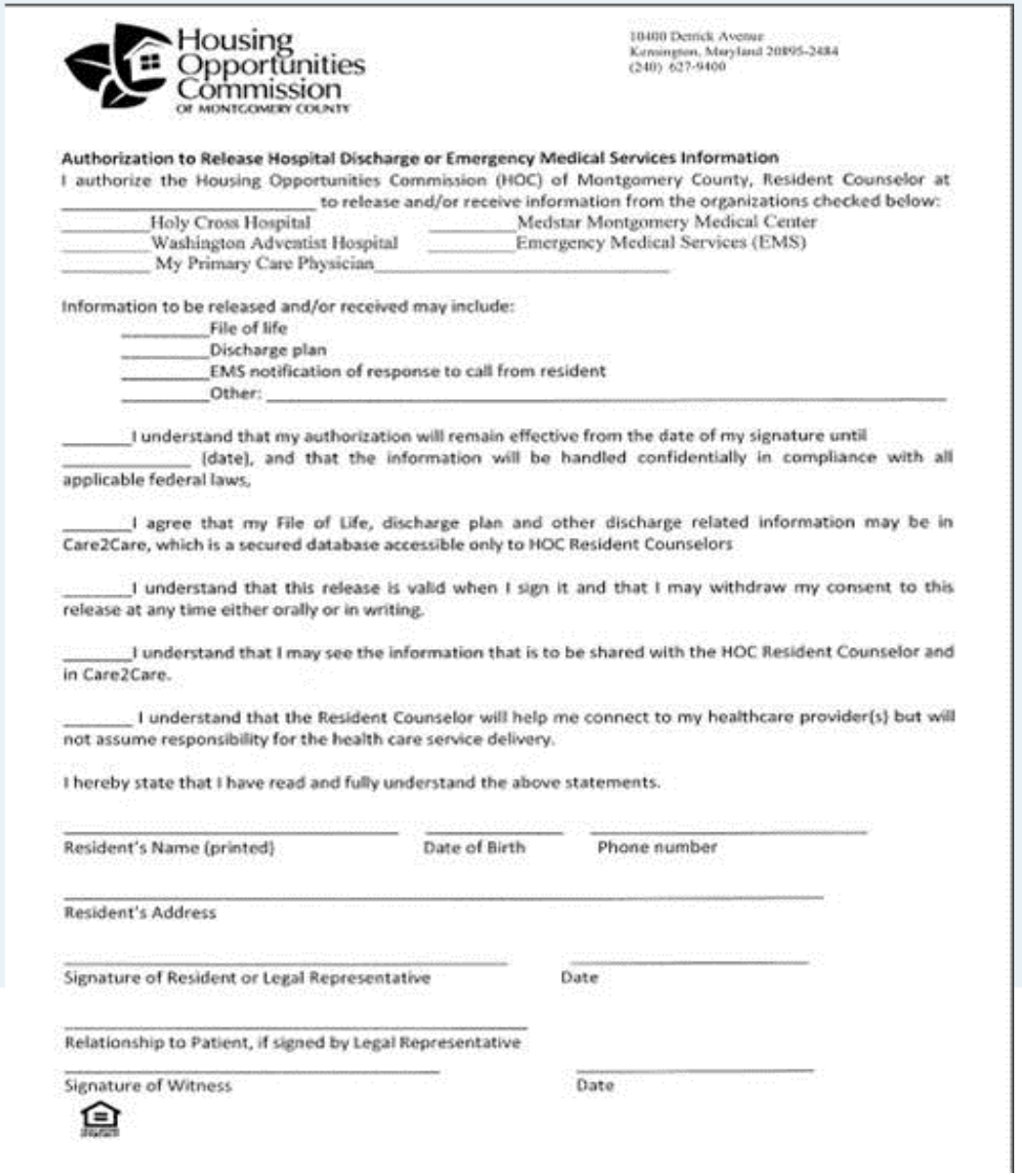
- The File of Life consolidates basic health information such as medical history, allergies, medications, and other health-related topics in one place. It is designed to hang by a red magnet on a refrigerator door in case emergency personnel need to assist the occupant of a home

- Completed with the Resident Counselor

- Updated yearly

Discharge Planning

- Release of Information



Housing Opportunities Commission of Montgomery County

10400 Detrick Avenue
Kensington, Maryland 20895-2484
(240) 627-9400

Authorization to Release Hospital Discharge or Emergency Medical Services Information

I authorize the Housing Opportunities Commission (HOC) of Montgomery County, Resident Counselor at _____ to release and/or receive information from the organizations checked below:

_____Holy Cross Hospital
_____Washington Adventist Hospital
_____My Primary Care Physician_____
_____Medstar Montgomery Medical Center
_____Emergency Medical Services (EMS)

Information to be released and/or received may include:

_____File of life
_____Discharge plan
_____EMS notification of response to call from resident
_____Other: _____

_____I understand that my authorization will remain effective from the date of my signature until _____ (date), and that the information will be handled confidentially in compliance with all applicable federal laws,

_____I agree that my File of Life, discharge plan and other discharge related information may be in Care2Care, which is a secured database accessible only to HOC Resident Counselors

_____I understand that this release is valid when I sign it and that I may withdraw my consent to this release at any time either orally or in writing.

_____I understand that I may see the information that is to be shared with the HOC Resident Counselor and in Care2Care.

_____ I understand that the Resident Counselor will help me connect to my healthcare provider(s) but will not assume responsibility for the health care service delivery.

I hereby state that I have read and fully understand the above statements.

_____ _____ _____
Resident's Name (printed) Date of Birth Phone number

_____
Resident's Address

_____ _____
Signature of Resident or Legal Representative Date

_____
Relationship to Patient, if signed by Legal Representative

_____ _____
Signature of Witness Date

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Medication Therapy Management

Pharmacists' Role in Medication Management

Assessment
- Interview patient & create database
- Review medication for indication, effectiveness, safety, and adherence
- List drug-related problem(s) & prioritize

Create and Implement Care Plan
- Goal of therapy
- Intervention and/or referral
- Plan for follow-up

Evaluation
- Monitor results
- Documentation
- Continuous follow-up

- Possible referral of patient to physician, another pharmacist or other healthcare professional
- Interventions directly with patients
- Interventions via collaboration (physician and other healthcare professionals)

Pharmacy services and/or interventions

Reassess as needed

This image has been adapted from the Medication Therapy Management (MTM) format outlined by the American Pharmacists Association and the National Association of Chain Drug Stores

EMS Interventions

Daily notification

New Hampshire Ave Incident Shift Date 808/09/2014						
Incident	**Date**	**Time**	**Call Type**	**Unit**	**Apartment**	**Location**
14-0090550	08/09/2014	19:02:58	26-A-11	A716	310	10120 New Hampshire Ave.

Monthly Stats

				2014 EMS Visits Holly Hall 2012-2013 Average = 4 per Month									
Building	1/14	2/14	3/14	4/14	5/14	6/14	7/14	8/14	9/14	10/14	11/14	12/14	Total
10100	3	2	4	2	3	3	5	2	1	1	2	4	32
10110	0	2	2	0	0	1	1	0	1	2	1	3	13
10210	0	0	0	0	4	1	1	2	0	2	2	0	12
Total	3	4	6	2	7	5	7	4	2	5	5	7	57

EMS Visits by Building (2012-2014)				
Building	Apartments	EMS 2012/100 Apartments	EMS 2012/100 Apartments	EMS 2012/100 Apartments
Arcola Towers	141	28	23	48
Elizabeth House	160	23	25	38
Forest Oaks	175	32	33	75
Waverly House	158	46	34	46
Holly Hall	96	55	45	63
Bauer Park	142		13	17
Town Center	112		13	20

Nursing Interventions

- University of Maryland School of Nursing
- 2 days /week
- Health Education
- Health Screening
- Assessments
- Case Management
- Referral and Follow-up

Technology

- Care2Care
  - Care 2 Care software provides a patient-centered record that consists of the essential care elements, barriers to care and self-management goals to facilitate optimal outcomes as the patient moves through the continuum of care
- Community Health Gateway
  - Web and call center solution
  - Easy to understand discharge instructions & medication information
  - Help in navigating healthcare and community services
  - Increased community collaboration

Successes

- Community Engagement
- Over 60% of residents have signed release of information
- Hospital transitional care teams working together
- EMS notification and follow-up
- MTM with positive outcomes on 9 residents
- On-site nurses
- Introduction of technology to assist in personal health management

Contact:

Mary Joseph RN, BC, CPHQ

MaryJane_Joseph@PrimaryCareCoalition.org

301-628-3458